

DEKALB COUNTY POLICE DEPARTMENT						Case #:	
GA0440200						11-125569	
INCIDENT REPORT							

EVENT	Incident Type: 16-45.1 LOITERING FOR SEX			Counts: 1	Incident Code: NONC	Offense Jurisdiction: CITY	Arrest Jurisdiction: CITY	
	WANTED PERSON LOCATED			1	NONC	CITY	CITY	
VICTIM	Premise Type: RED ROOF INN			Weapon Type:		Forcible: N	Stranger To Stranger: Y	
						Hate Motivated: <input type="checkbox"/>	Loc Code: 191	
	Date Report: 11/7/2011 3:59:00 PM Incident Start: 11/7/2011 3:59:00 PM Incident End: 11/7/2011 5:35:00 PM Incident Location: 1960 N DRUID HILLS RD 307 ATLANTA GA							
	Name (Last, First Middle):			Moniker:	DOB:	Age:	Sex:	Race:
	Address:			Home #:	Work #:	Cell #:	Email:	Ethnicity:
	SSN:	Resident Status:	HGT:	WGT:	Hair Color:	Hair Style:	Hair Length:	Eye Color:
	Occupation:	Employer:	Address:		Employer Phone:			State:
	Victim Type:			Student: Yes <input type="checkbox"/> No <input type="checkbox"/>	If Yes, Name of Victim's School:		LEOKA Activity Type:	LEOKA Assignment Type:
	Injuries: <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Internal <input type="checkbox"/> Teeth <input type="checkbox"/> Unconscious <input type="checkbox"/> Lacerations <input type="checkbox"/> Bones <input type="checkbox"/> Other			Used: <input type="checkbox"/> Drugs <input type="checkbox"/> Alcohol <input type="checkbox"/> Computer				
	SMTs:							
OFFENDER	Relationship To Offenders:			(1) _____	(2) _____	(3) _____	(4) _____	(5) _____
				(6) _____	(7) _____	(8) _____	(9) _____	(10) _____
	Offenses Involved:			(1) _____	(2) _____	(3) _____	(4) _____	(5) _____
				(6) _____	(7) _____	(8) _____	(9) _____	(10) _____
	Name:			Moniker:	DOB:	Age:	Sex:	Race:
	Address:			Home Phone:	Work Phone:	Cell Phone:	Email:	Ethnicity:
	SSN:	Resident Status:	HGT:	WGT:	Hair Color:	Hair Style:	Hair Length:	Eye Color:
	Occupation:	Employer:	Address:		Employer Phone:			State:
	SMTs:							
	Offenses Involved:							
PROPERTY	WANTED: <input checked="" type="checkbox"/> WARRANT <input type="checkbox"/> ARREST <input type="checkbox"/>			SUSPECT ARMED: N		WEAPON: _____		
	TOTAL NUMBER ARRESTED: 0			ARREST AT OR NEAR OFFENSE SCENE: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Used: <input type="checkbox"/> Drugs <input type="checkbox"/> Alcohol <input type="checkbox"/> Computer		
	VEHICLES			CURRENCY, NOTES, ETC		JEWELRY, PREC. METALS		FURS
	STOLEN \$0.00			\$0.00		\$0.00		\$0.00
	RECOVERED \$0.00			\$0.00		\$0.00		\$0.00
	CLOTHING			OFFICE EQUIP.		TV, RADIO, ETC		HOUSEHOLD GOODS
	STOLEN \$0.00			\$0.00		\$0.00		\$0.00
	RECOVERED \$0.00			\$0.00		\$0.00		\$0.00
	FIREARMS			CONSUMABLE GOODS		LIVESTOCK		OTHER
	STOLEN \$0.00			\$0.00		\$0.00		\$0.00
RECOVERED \$0.00			\$0.00		\$0.00		\$0.00	
ADM	GCIC ENTRY <input type="checkbox"/> WARRANT <input type="checkbox"/> MISSING PERSONS <input type="checkbox"/> VEHICLE <input type="checkbox"/> ARTICLE <input type="checkbox"/> BOAT <input type="checkbox"/> GUN <input type="checkbox"/> SECURITIES <input type="checkbox"/>							
	DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG-RELATED? IF YES, PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
	<input type="checkbox"/> 1 - Amphetamine <input type="checkbox"/> 2 - Barbiturate <input type="checkbox"/> 3 - Cocaine <input type="checkbox"/> 4 - Hallucinogen <input type="checkbox"/> 5 - Heroin <input type="checkbox"/> 6 - Marijuana <input type="checkbox"/> 7 - Methamphetamine <input type="checkbox"/> 8 - Opium <input type="checkbox"/> 9 - Synthetic Narcotic <input type="checkbox"/> U - Unknown							
CLEAR	REQUIRED DATA FIELDS FOR CLEARANCE REPORT <input checked="" type="checkbox"/> CLEARED BY ARREST <input type="checkbox"/> EXCEPTIONALLY CLEARED <input type="checkbox"/> UNFOUNDED			DATE OF CLEARANCE		11-07-2011 <input checked="" type="checkbox"/> ADULT <input type="checkbox"/> JUVENILE		
	REPORTING OFFICER G M HARRISON 3050			NUMBER 3050		APPROVING OFFICER NUMBER		

PL Sum. J.

Ex. 62

DEKALB COUNTY POLICE DEPARTMENT
GA0440200
NARRATIVE

Case #:
11-125569

Officer ID/Name:

Date:

Approving Officer ID/Name:

Date:

Title:

INITIAL REPORT

On 11-07-2011 at approximately 1559 hours, I was patrolling the area of 1960 N Druid Hills Rd (Red Roof Inn), when I observed two females standing on the third floor speaking to a gentleman. Once the gentleman observed my unit, he then turned away and walked away from the two females. This location is known for prostitution and drug activity.

I then went upstairs to the location, and one of the females turned and walked inside the room. I then observed two cups on the ledge. One of the suspects then asked me if it was illegal to drink outside because she was unfamiliar with Georgia law. I then asked if alcohol was in the drinks and they stated yes. I then asked them to take the drinks back inside. I then asked the female to step outside. Upon asking the female for her name, she identified herself as Shanita Branch (suspect). She stated that she moved from Macon and was staying at the hotel. The female matched the description of female listed on website for implied prostitution. I then asked the female several times to be honest with me on what she was doing at the hotel. She stated just staying with a friend. I then showed the suspect the ad which clearly shows her face and body

(<http://atlanta.backpage.com/femaleescorts/50-specials-2-sexy-hot-chocolate-ladies-here-to-make-your-wildest-dreams-come-true-25/9762754>). The suspect then admitted that she has been prostituting out of room #307 for the past day. She stated that she was at another room previously during the week but moved. She then asked if she was going to be arrested because she has warrants for Forgery out of Macon. I then took the suspect into custody. NCIC was down at the moment and our radio operator called Macon Police and they stated that they would not extradite the suspect (Per Mr. McHolmes out of Macon PD). I then lodged the suspect under the county charges of 16-45.1 Loitering for Sex.